

**Staple Issue Slip Here**

POSITION		ID NO.	DATE
CLASSIFIER			
EXAMINER		890	9/9/97
TYPIST			
VERIFIER			
CORPS CORR.			
SPEC. HAND			
FILE MAINT.			
DRAFTING			

# INDEX OF CLAIMS

[illegible]

Final	Claim	Date					
		Original					
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## SYMBOLS

✓	.....	Rejected
-	.....	Allowed
-	.....	(Through numeral) Canceled
+	.....	Restricted
N	.....	Non-elected
I	.....	Interference
A	.....	Appeal
O	.....	Objected